



Application to License Rental Dwelling

Blaine City Hall • Housing Division • 10801 Town Square Drive NE • Blaine, MN 55449

Rental Licensing Period: **06/01/16 - 05/31/17**

Rental License H16- _____
Staff only

(Please sign this box ONLY if you are no longer renting your property)

I, _____ confirm this property is **no longer rental** and agree to immediately contact the Housing Division upon a status change in the future. Initial & date: _____.

Property Address: _____

Reason for non rental status: vacant/for sale owner living on property Other _____

Effective date for non rental status: _____

HOUSING TYPE

Detached = No adjoining wall. **Attached** = Adjoining wall to another unit.

Single-Family (Detached)

- ___ House
- ___ Townhouse
(Entry door from outside)
- ___ Manufactured Home

SINGLE-FAMILY STRUCTURE

Single-Family (Attached)

- ___ Townhouse (Entry door from outside)
- ___ Condominium (Has hallway to entry door)

SINGLE-FAMILY UNIT IN MULTI-FAMILY STRUCTURE

Multi-Family Rental Structure

- ___ Duplex
- ___ Triplex
- ___ Fourplex
- ___ Sixplex
- ___ Multi-family 7+

MULTI-FAMILY STRUCTURE

RENTAL PROPERTY ADDRESS:

Single Family Address: _____

Multi Family Complex Name & Address: _____

OWNERSHIP TYPE (Please check one)

Individual

Corporation

Partnership

OWNER INFORMATION (Individual or Company)

Name:		Email:		
Mailing Address:		City:	St:	Zip:
Phone:	Fax:		Cell:	

CORPORATE (First Officer) if applicable

Name:		Email:		
Mailing Address:		City:	St:	Zip:
Phone:	Fax:		Cell:	

PARTNER if applicable

Name:		Email:		
Mailing Address:		City:	St:	Zip:
Phone:	Fax:		Cell:	

MANAGEMENT (Owner, Manager or Authorized agent)

Name:		Email:		
Mailing Address:		City:	St:	Zip:
Phone:	Fax:		Cell:	

ON-SITE Manager or Caretaker (Multi-family only)			
Name:		Email:	
Mailing Address:		City:	St: Zip:
Phone:	Fax:		Cell:

FEE SCHEDULE – Please include payment along with application when turning in.

\$190 = Single-family (attached or detached) for each dwelling

Multi-family \$180 per building plus \$10 per unit
Example: Duplex \$180 + \$20 = \$200 Example: Fourplex \$180 + \$40 = \$220

Contract for Deed – Buyer must file contract with Anoka County **or** Submit Rental License and fee

Late Fee – A fee of \$60.00 for every 30-day period past due will be imposed.

Application fee is NOT prorated or refundable

**Please be aware, once you send in your payment, it could take up to 90 days before your check is cashed. They are processed in the order they come in. This is due to the high volume of rentals in the City of Blaine.*

Number of buildings _____	Number of units per building _____	Number of rental units per building _____
Total number of rental units _____	Total Fee Paid \$ _____	
Make checks payable to: City of Blaine		

I understand that I will operate and maintain the subject premises identified herein according to the City of Blaine’s Code of Ordinances Chapter 18, Article VIII and Article X and the laws of the State of Minnesota. Agreement to allow inspection pursuant to Sec. 18-321.

Furthermore, I certify I am the owner or owner’s authorized agent and answers contained herein are true and accurate in all respect to the best of my knowledge and belief. **As owner , manager or owner’s authorized agent, I agree to meet with the City of Blaine Inspector on-site for all required inspections and/or reinspections pursuant to Section 18-503(b). Tenants are not considered authorized agents.**

In accordance with the Minnesota Government Data Practices Act, the City of Blaine hereby informs you that some or all the information you are asked to provide is classified as public. This information will be used to process your Rental License Application Form. You may choose to withhold this information, however, if you do, the City of Blaine may not be able to process your form and issue you a rental license.

All renewal paperwork will be sent to the owner of record per Anoka County Property Records.

Applicant Signature: _____ **Date:** _____

If you have any questions about the City of Blaine’s Rental Licensing and Inspection Program, please contact Jodi in the Housing Services Department at 763-785-6146.